FEC

STATEMENT OF

FORM 1	ORGANIZ	ATION		
1 Ottom 1	(See instruction	ons)		Office use only
NAME OF COMMITTEE (in f	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
Interactive Ad	vertising Bureau Political Action	n Committee		
ADDRESS (number and s	P O Box 26366			
(Check if address is changed)				
	Alexandria		J LYA L	22313 -
		CITY	STATE	ZIP CODE 🛦
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one e			
(Check if address is changed)	sarceneaux@politic	calcompliance.com		
COMMITTEE'S WEB I	PAGE ADDRESS (URL)			
(Check if address is changed)				
	1			
2. DATE 0.3	/ D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFICA	TION NUMBER	C C00443309		
4. IS THIS STATEM	ENT X NEW (N) OR	AMENDED (A)	
I certify that I have examin	ned this Statement and to the best of my kn	owledge and belief it is true, corre	ect and complete	
	Treasurer Mike Zaneis			
Type or Print Name of	Treasurer			
Signature of Treasurer	Electronically Filed by Mike Zan	eis	Date 03	17 Y 2009
NOTE: Submission of fal	se, erroneous, or incomplete information ma	ay subject the person signing this		
Office		For further information		
Use Only		Federal Election Con Toll Free 800-424-95	nmission	FEC FORM 1 (Revised 02/2009)